Mailing Address:				
City, State, Zip Code: Davtime / Evening Phone:	elf or Attorney for Plaintiff Respondent			
Person Filing Document is:	elf <i>or</i> Attorney for Plaintiff Respondent			
(If Attorney) State Bar No.:	Attorney Phone:			
SUPERIOR COURT of ARIZONA IN MARICOPA COUNTY				
(2)	(3) Case No			
(2)				
(2)	( <b>4)</b> ATLAS No			
<b>(2)</b> Respondent/Defendant (in original case	AGREEMENT TO CHANG	F / MODIFY		
respondent Berendant (in original base	ORDER OF ASSIGNMENT			
of their own free will and not under	Assignment should be changed. The parties are stany fear or threat of force. This Agreement applies existing child support or spousal maintenance or an existing child support or spousal maintenance.	es only to the Order of		
l, <b>(5)</b>	, the person ordered to make paymen	ts (the Obligor), and		
l, (5)	, the person receiving payments (the	Obligee), ask the		
Court to change the "Order of Ass				
The Order was issued by:		(Name of Court)		
Located in this County:		(Name of County)		
Located in this State:		(Name of State		
From the <i>current</i> amount of <b>(7)</b> \$ _ <b>because:</b>	to the <i>new</i> amount of (8) \$			
(9) Check the appropriate box(es) to e	xplain why the Order of Assignment should be changed.			
payments (the Obligor) is no I Child Support Order:		children named in the		
(b) Payments are no longer o  past-due child support  past-due spousal mainte  current spousal mainten				
	(Obligee) is deceased, but past-due amounts (arrea e state.* (Attach Copy of Death Certificate or Obitua			

FOR CLERK'S USE ONLY

Case No.	

\*Note: if person receiving payments is deceased and no payments are owed to the state, you may need to file a request to *change the Child Support Order*: (1) to make sure your support payments are going to the right person; (2) to make sure you are being properly credited for payments that you make, and (3) to make sure you are not paying when you don't have to. Consult an attorney, if possible, to help determine your rights, responsibilities and options.

(d not su		attach any supporting documents) (Consult an attorney if
	The condition(s) for changing the amour place as of this date:	nt of the payments has (have) not yet occurred but will take
(10)	Payments are still owed for, and the a Current spousal maintenance (alimor Past-due spousal maintenance (arrea Current child support for one or more Past-due child support	arages/interest)
		are still owed, STOP! You must nent to Stop the Assignment.
<u>D</u>	o not write or sign below this line until	you are instructed to do so by Court Clerk or Notary.
l a	affirm the information provided in this d	ocument is true and correct under penalty of perjury.
Petitio	oner's Signature	Date
Affirm	ed before me this date:	
Seal/N	My Commission expires	Deputy Clerk or Notary Public
Respo	ondent's Signature	
•	ed before me this date:	Duito
Seal/N	My Commission expires	Deputy Clerk or Notary Public
	child support division of the Attorney sentative of the Attorney General must app	General's office is involved in this case, a rove the change and sign below:
Signat	ture of Attorney General's representative	 Date